The Hampden Hippocrat

A Bulletin for the Hampden District of the Massachusetts Medical Society

VOLUME XVIII DECEMBER, 1962 NO. 10

MEMBER
MEDICAL SOCIETY
MAGAZINE GROUP

SPECIAL ISSUE

MEDICAL ETHICS

Hampden District Medical Society

1414 STATE STREET — SPRINGFIELD, MASS.
Telephone: REpublic 6-0661
Vivian M. Purdy, *Executive Secretary*

OFFICERS

President . . . . . Ralph T. Miller, M. D.
Vice President and President-Elect . . . . . Martin B. Murray, M. D.
Secretary . . . . . Ray T. Smith, M. D.
Treasurer . . . . . B. Lincoln Wales, M. D.
Assistant Secretary . . . . . Henry G. Ring, M. D.

Executive and Grievance Committees

Ralph T. Miller, M. D., *ex-officio*

Jerome A. Whitney, M. D.	*ex-officio*	Martin B. Murray, M. D.
Ray T. Smith	*ex-officio*	B. Lincoln Wales, M. D.
Howard P. Kennedy, M. D.	1963	Harry N. Memery, M. D.
John J. Bandeian, M. D.	1964	John W. Turner, M. D.
Frank G. Mills, M. D.	1965	Lester G. Suzor, M. D.

Chairmen of Standing Committees

Public Relations . . . . . Harry N. Memery, M. D.
Legislative . . . . . Robert W. Emery, M. D.
Board of Membership . . . . . Samuel F. Potsubay, M. D.
Blue Shield District Professional Service . . . . Walter J. J. Nero, M. D.
Malpractice and Medico-Legal Affairs . . . . Robert LaMarche, M. D.
Public Health . . . . . Norman A. Pokorny, M. D.
To Committee on Tax-Supported Medical Care . Harry L. Roberts, M. D.
Nominating Committee . . . . . Oliver J. Menard, M. D.

Chairmen of Special Committees

Insurance, Labor Relations and Industrial Accidents . Cyril E. Shea, Jr., M. D.
Medical Advisory . . . . . Noah N. Feldman, M. D.
Woman's Auxiliary . . . . . Elmer Franseen, M. D.
Emergency Medical Service . . . . . Peter Zarecki, M. D.
Health and Accident Insurance . . . . . H. Bernard Tillman, M. D.
Mental Health . . . . . Olive A. Cooper, M. D.
Rehabilitation . . . . . Jerome A. Whitney, M. D.
Hospitals and Health Agencies . . . . . Frank E. Hurley, M. D.
Disaster Medical Care . . . . . Kenneth L. McEwen, M. D.
Medico-Religious . . . . . John J. Bandeian, M. D.
By-Laws . . . . . Max Millman, M. D.
Representatives on Community Council
Jerome A. Whitney, M. D. and Frank E. Hurley, M. D.

The Hampden Hippocrat

"Life is short and art is long, the occasion fleeting, experience fallacious and judgment difficult."
Hippocrates

Founded in 1942 by Drs. Edward P. Bagg and William A. R. Chapin, and published monthly except July and August.

BOARD OF EDITORS

Edward P. Bagg, M. D. *Editor-Emeritus*
Max Millman, M. D. *Editor-in-Chief*
(111 Maple Street, Springfield 5, Mass.)
John C. Ayres, M. D. *Assistant Editor*

Associate Editors

Olive A. Cooper, M. D.
Harold J. Holleran, M. D.
Frank E. Hurley, M. D.
Richard J. Maher, M. D.
Ralph T. Miller, M. D.
H. Bernard Tillman, M. D.
George A. Vassos, M. D.
David W. Williams, M. D.

John E. Leary, M. D. *Secretary and Business Manager*
(302 Sumner Avenue, Springfield 8, Mass.)
Joseph B. Greenspan, M. D. *Asst. Sec. and Bus. Manager*

THE HAMPDEN HIPPOCRAT, DECEMBER, 1962

SPECIAL ARTICLE

MEDICAL ETHICS

by

Allen S. Johnson, M.D., President-Elect
Massachusetts Medical Society

All literate societies have had their codes of ethics and, in the case of guilds or elites, these have been more formalized and specific. Their purpose has been two-fold: to guide men of good faith toward the avowed goal of the group; to furnish a means of bringing to book those of bad faith who would, by unethical practices, jeopardize the prestige of the group. The best interest of the patient has been the traditional cornerstone of the various codes of medical ethics but in a specific case this may be difficult to identify. Here the Golden Rule may be a useful guide.

To assist in the application of these principles, a code of medical ethics has been evolved dealing with the physician's relation to his patient, to his fellow practitioners, and to the public. The A.M.A.'s current "Principles of Medical Ethics" with its accompanying annotations by the Judicial Council indicates that the latter is aware of the variations in our mores due to time and to geography despite the constancy of the basic principles. Judicial

Committees concerned with the application of these principles are also aware of how difficult it may be to distinguish between questions of ethics and questions of good taste. This article is an attempt to condense the quaint but useful code of 1955 and earlier and to amplify the current stream-lined version of Principles which is too brief and general to be useable without a detailed study of the accompanying documentation by the Judicial Council.

The Doctor's Obligations to the Patient

In addition to professional competence the patient is entitled to the following:

Faithfulness: Whereas the "doctor may choose whom he will serve and is under no legal or moral compulsion to care for any and every patient who seeks him". once he has assumed this responsibility he may not terminate it without providing for the patient's care. He should, moreover, respond to any request for his assistance in an emergency or whenever temperate public opinion expects the service. In the case of an emergency involving another doctor's patient he should notify both parties that the patient is being returned to his original doctor as soon as the latter is available.

Discretion: Facts relating to a patient's illness and private life must not be revealed except: (1) to a consultant called in on the case. (2) when ordered by a court according to the laws of the state. (3) to a **responsible** relative or friend when necessary to the proper care of the patient. (4) to the local health officer according to existing statutes when the patient's communicable disease threatens a healthy person.

Courtesy and Kindness: It might seem superfluous to suggest to a doctor that his patient is entitled to courtesy and kindness but it is surprising how often complaints to the Committee on Ethics and Discipline have arisen from such failure on the part of the doctor, often because he has not allowed for ignorance, fear, the infirmities of age, or the effects of the disease.

Truth: The patient is entitled to know the truth if he demands it but the doctor must be sure that it is really the truth. A deliberate lie is never justified but the impact of a distressing truth can be softened by its manner of presentation. Responsible relatives or friends should be informed of a serious diag-

(continued on page 19)

FOREIGN & SPORT CAR BROKERS

BUYING - SELLING - TRADING - ALL MAKES & MODELS

New & Used - Compact - Economy & Sport Cars

Western New England's Oldest Imported Car Agent

280 INGLESIDE STREET — ROUTE #5

HOLYOKE, MASSACHUSETTS

Telephone: JEfferson 3-2340

President's Page

In December, life on the Northern Hemisphere of our globe reaches its lowest point. Toward the end of the month, however, the days begin to lengthen as if to symbolize a resurgence of life. Man celebrates this revitalization with observances of many types, with the main theme always focused on the Brotherhood of Man.

The philosophy inherrent in all these seasonal celebrations is the regard for the rights and privileges of others, as expressed in the Golden Rule, which apparently antedates the Greek civilization. This has been codified by the various professions into Codes of Ethics. These have evolved over the years until now when each person entering a profession usually pledges to abide by their principles. In medicine the Hippocratic Oath delineates our own basic duties and responsibilities, and these are further enlarged upon in the Principles of Ethics of the Massachusetts Medical Society and of the American Medical Association.

In bygone years, "Ethics" was one of the important subjects taught in the medical school. Today, perhaps due to the extra heavy demands of scientific medicine, it seems to have lost its proper place in the curriculum. The result is that our young graduates know little about it and our profession suffers a great deal as a consequence.

Therefore, in this December of 1962, it seems only appropriate that we rededicate ourselves to the principles of medical ethics. Some may scoff at the idea, saying that ethics are old-fashioned and that we live in a modern world where everything has changed. Ethics do not change. They are governed today as they were two thousand years ago by the philosophy expressed in "Peace on earth, good will toward all men".

And a very Merry Christmas and a Happy New Year to every member of the Society.

Ralph T. Miller, M.D.

CHARLES J. SPAID, M.D.

1873 - 1962

Dr. Charles J. Spaid of Springfield, Mass., died at his home on November 12, 1962.

Dr. Spaid was born in Copake, N. Y., on July 26, 1873. After attending Yale University for two years, he went on to receive his degree in medicine from the University of Vermont in 1898. After graduation, he served for a year as an interne at the Bellevue Hospital, New York, and then came to Springfield in 1900 to enter into private practice. Dr. Spaid served on the staff of the Wesson Memorial Hospital for many years.

Medical organizations of which he was a member include the American Medical Association, the Mass. Medical Society, the Hampden District Medical Society, and the Springfield Academy of Medicine.

Deepest sympathy is extended to the surviving members of his family and to his many friends and associates.

COMING EVENTS

HAMPDEN DISTRICT EXECUTIVE COMMITTEE MEETINGS,
DECEMBER 18, and JANUARY 15

AMERICAN ASSOCIATION FOR THE ADVANCEMENT OF SCIENCE
PHILADELPHIA, DECEMBER 26 - 31

PRE-COUNCIL MEETING, JANUARY 4, 1963.
SPRINGFIELD ACADEMY OF MEDICINE, JANUARY 8, 1963.

AMERICAN ACADEMY OF ORTHOPEDIC SURGEONS,
MIAMI BEACH, FLA., JANUARY 20 - 25, 1963.

HAMPDEN DISTRICT MEETING, FEBRUARY 5, 1963.

STATE COUNCIL MEETING, FEBRUARY 6, 1963.

AMERICAN COLLEGE OF CARDIOLOGY, LOS ANGELES,
FEBRUARY 28 to MARCH 4, 1963.

M. M. S. ANNUAL MEETING, BOSTON, MAY 21, 22, and 23, 1963.

ANNUAL MEETING A. M. A., ATLANTIC CITY, JUNE 16 - 20, 1963

E ACHROMYCIN®

Tetracycline Lederle

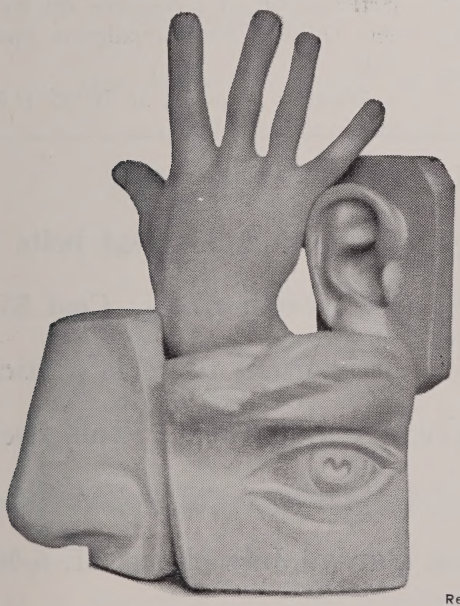
R ACHROMYCIN Ear Solution concentrates the potent activity of tetracycline for effective local anti-infective action. It is especially useful in otitis externa due to mixed organisms. Patient antibiotic intolerance and tissue toxicity are minimal. ACHROMYCIN Ear Solution is effective against both Gram-positive cocci and Gram-negative bacteria.

ACHROMYCIN Ear Solution: Each unit contains 1 bottle Powder, 50 mg.: 1 bottle Diluent (benzocaine 5% solution in propylene glycol).

When oral therapy is indicated

ACHROMYCIN® V

Tetracycline HCl with Citric Acid Lederle
Capsules—250 mg., 100 mg.



Request complete information on indications, dosage, precautions and contraindications from your Lederle representative, or write to Medical Advisory Department.

LEDERLE LABORATORIES · A Division of AMERICAN CYANAMID COMPANY · Pearl River, N.Y. Lederle

DECEMBER (4) MEETING HIGHLIGHTS

Meeting is held at Storrowton . . . 189 in attendance against 223 reservations . . . After a tasty cut of roast beef a sound film—"Your Health—Your Choice" is presented. Narrator is Dr. Edward R. Annis, President-elect of A.M.A. . . . .

President Miller calls meeting to order at 8:45 P.M. . . . Moment of silence is observed in memory of Dr. C. J. Spaid who expired since last meeting . . . Motion that H.D.M.S. go on record as favoring and supporting Medical School in the Springfield area is carried. Special Medical School Committee, with Dr. Robert Emery as chairman, is appointed . . . .

Announcements: Dr. H. Shuman is appointed liaison member with U. of Mass. to arrange seminar for Medicine in the Future . . . Seat belts are for sale at headquarters . . . Dr. Bob O'Malley to receive the 1962 Sports Illustrated Silver Anniversary All-America award . . . Dr. Ned Bagg is given tumultuous ovation on this his 79th birthday . . . Dr. Duval to replace Dr. Tessier on Disaster Committee . . . Two transfers to Hampden are announced: Dr. Roland R. Cartier from Middlesex East and Dr. Jacob Shammash from Norfolk . . . .

Committee Reports: (1) *Diabetes Detection Week,* (2) *Emergency Medical Service* . . . Recommendation that in the smaller communities all M.D.'s in active practice, regardless of age, participate in emergency programs, is disapproved . . . It is voted to refer matter to local areas for implementation on their own terms . . . (3) *Mental Health* recommends that (a) Mental Health center be secured and (b) conjoined pattern of program with both the local group and State Mental Health Dept. participating . . . After much debate this is defeated . . . (4) *By-laws* recommends adoption of amendments to Chapter I. These are approved . . . (5) *Executive Committee's* resolution urging support of Kerr-Mills law is approved . . . Dr. J. Turner announces 100% participation of physicians during recent United Fund campaign in Springfield.

Meeting adjourns at 10:45 P.M.

SEAT BELTS FOR SALE

Members of the Society may now obtain seat belts for their automobiles through Society Headquarters. Cost $5.50. Installation, if desired, $2.50. In addition there is a sticker which reads, "Seat Belts Save, We Use Them". This sticker bears the seal of H.D.M.S.

Orders are taken by Mrs. Purdy. Just phone RE 6-0661.

THE HIPPOCRATIC OATH*

I do solemnly swear by that which I hold most sacred:

That I will be loyal to the profession of medicine and just and generous to its members;

That I will lead my life and practice my art in uprightness and honor;

That into whatsoever house I shall enter, it shall be for the good of the sick to the utmost of my power, I holding myself aloof from wrong, from corruption, from the tempting of others to vice;

That I will exercise my art solely for the cure of my patients, and will give no drug, perform no operation for a criminal purpose, even if solicited, far less suggest it;

That whatsoever I shall see or hear of the lives of men which is not fitting to be spoken, I will keep inviolably secret.

These things I do promise and in proportion as I am faithful to this, my oath, may happiness and good repute be ever mine — the opposite if I shall be forsworn.

* As paraphrased from the Greek by Professor John G. Curtis of the College of Physicians, Columbia University.

MEDICAL ETHICS IN SASKACHEWAN

Over thirty years ago, a professional social worker from abroad informed the M.M.S. that socialized medicine was bound to come, no matter what physicians thought or could do about it. That seemed too remote a possibility to spur active opposition. However, on the first day of July, 1962, the Saskatchewan government, assumed control of the practice of medicine. Getting nowhere with the inflexible authorities in the fierce debates which followed, the majority of the doctors of the Province withdrew from practice. They saw no infringement of medical ethics since two hundred remained to take care of emergencies and accidents. However, the press of Canada and the U. S. felt differently. The absentees were pilloried as strikers who had abjured the Oath of Hippocrates. Bill Mauldin's syndicated cartoon of the baby abandoned on Saskatchewan's door step was an expert example.

It is safe to assume that if all aspects of the Saskatchewan affair were presented fairly and squarely the blame would unquestionably be placed elsewhere. The situation was best described by Dr. William Dameshek in the September issue of New Medical Materia. We quote freely:

" . . . much of the criticism against the Saskatchewan doctors was based on a rather sketchy and one-sided presentation of the facts. The fact of the doctors striking against the government was emphasized, while the reasons for this rather radical step were subordinated or not even mentioned.

"It is apparent that the government of Saskatchewan was determined to demonstrate:

"That medical care in that province is a function of the state and should be as completely state-controlled and managed as possible.

"That any other type of medical care, such as private practice, be made difficult to carry out.

"Under the original Saskatchewan plan, the physicians were in effect conscripted by the state to take care of patients at a set wage scale, private practice being something questionable —if not actually illegal.

"The doctors were advised that they could follow the governments's rules, or else! From what I have seen in many countries throughout the world, this all-or-none attitude is almost unparalleled."

Dr. Dameshek then proceeds to show that in socialized-medicine countries, such as Great Britain, Sweden, and New Zealand, patients have the privilege of consulting private physicians. Even in communistic countries many doctors have some private practice. He concludes as follows:

'The Saskatchewan crisis was precipitated by an inflexible set of rules aimed at complete government control of every phase of medical practice. The physicians, not getting anywhere during negotiations, took to the strike.

"Whether this was right may be debated—but certainly there was justification for protest. The need for tolerance of the physicians' attitude, the lack of flexibility in the government's approach towards an ancient and honorable profession—these were insufficiently emphasized in the public press."

Bagg

PATRONIZE OUR ADVERTISERS

SPOTTING THE CANCER QUACK

1. His treatment or method of administration is available only from himself.

2. He uses news releases on radio and TV or in newspapers rather than scientific journals for his preliminary publicity.

3. He has no scientific controls to support the efficacy of his method.

4. His "cured" patients often show no evidence of ever having had cancer.

5. His medical records are scanty or nonexistent.

6. He discourages or evades consultation with reputable physicians.

Dr. L. Henry Garland

'COUNSELORS IN ETHICS'

Chief Justice Earl Warren of the United States stated recently that Americans urgently need professional "counselors in ethics" to help them apply Biblical principles to the complex problems of modern life.

"I do not regard the word of Scripture as a dead letter, addressed only to the generations who heard it from the mouths of the prophets. I regard the Scriptures as a living tradition, as applicable in our time as in any other.

"But in a changing world, this word needs new interpreters, adventuresome spirits able to make it effective in our lives."

HAMPDEN NATIONAL BANK
AND TRUST COMPANY
of Westfield, Westfield, Mass.
"Westfield's Oldest Commercial Enterprise"

MEDICAL MANAGEMENT
99 Amostown Rd. West Springfield, Mass.
REpublic 6-2584
Modern Electronic Billing & Related Business Services for Medical Men

TESTIMONY

"Thank you for your patience and consideration." L.B., Internist

". . . excellent coverage. Firm of Lessere-Wertheim most courteous, helpful and prompt." W.C., Obs.

"Have four health and accident policies that have been in effect considerably longer than yours — and paradoxically enough your checks were the first to arrive. My thanks to you." C.B., Surg.

Over 75% of Society has enrolled. Have you? For facts and figures . . .

PHONE RE 3-4545

Your New GROUP PROTECTIVE INSURANCE
Administered Right From the Springfield Offices of . . .
Lessere-Wertheim, Inc.
Professional Insurers
Underwritten by HARTFORD ACCIDENT AND INDEMNITY CO

AUXILIARY DOINGS

At The White Cap Ball

Left to right: President and Dr. Hartshorn, Mrs. and Dr. Larson and Mrs. and Dr. Setrag Zacarian.

Luncheon Meeting

The Woman's Auxiliary to the Hampden Disrtict Medical Society opened its program for the 1962-63 season with a luncheon meeting held at the Federal Hill Club on October 16th. Guest speaker, Sidney Shapiro, Development Administrator of Springfield Redevelopment Authority, gave a thought-provoking talk on "The Image the Doctor Presents to the Public".

White Cap Ball

The Auxiliary's tenth annual dinner-dance, held at the Crestview Country Club on November third, was highly successful, both socially and financially. Our thanks to White Cap Ball chairman, Mrs. Emanuel Wiedman and her committee, Mrs. Setrag Zacarian, Mrs. Harry Memery, Mrs. John Larson, Mrs. Irving H. Steinberg, Mrs. Edwin Gillis, Mrs. Charles Diamond, Mrs. Fred Ziter, and Mrs. Raymond Conway for a delicious dinner and a most enjoyable evening of dancing and entertainment. Proceeds from the Ball, swelled by donations from those unable to attend, will furnish about $1850 for scholarships which will be awarded in the spring to students in nursing and related fields of study.

Career Scholarships

Letters have been mailed to the counselors of all secondary schools

in Hampden District so that students might be informed of the opportunities for financial help given every year by the Auxiliary to deserving students in nursing schools. Students in area hospitals who received checks this September, and their progress in school, will be watched with interest throughout the year. More information, and applications for next year's scholarships may be obtained from Mrs. J. O. Menard, chairman of this committee.

Career Recruitment

Letters have gone also to the twenty-two high schools of the area from Mrs. Irving Hoff to foster interest in nursing careers. Later in the year, literature describing opportunities in this field will be distributed and displays set up in the various schools to promote students' inquiries.

A.M.A. - E.R.F.

The old A.M.E.F. has become A. M.A. - E.R.F.—American Medical Association-Educational Research Foundation. This district's fund is off to an excellent start this year—$120 already. It may be swelled by sending donations to A.M.A. - E.R.F., c/o Mrs. John Yelle of Holyoke, for appropriate cards expressing sympathy, congratulations, or appreciation. Mrs. Yelle also has all-purpose cards to be used for any occasion, new this year.

Safety

Mrs. Edwin Gillis reports Auxiliary cooperation with the A.M.A. drive for seat belts in our cars.

Christmas Tea

The holiday social of the Auxiliary, its Christmas tea, will take place this year on December 4th in the home of Mrs. Bronislaus Galuszka. Traditional decorations, and musical selections offered during the afteroon by the Woman's Bell Choir of Second Congregational Church in Holyoke will provide just the right atmosphere to ring in the Christmas season.

Mrs. Thomas Ferriter is chairman of the affair, with Mrs. George Ross her co-chairman. Massachusetts Medical Auxiliary President, Mrs. Arthur Rappaport and President-elect Mrs. Eugene Holden, as well as new and prospective members of our District Auxiliary, have been invited as honored and special guests.

Mrs. Carlo Q. Montori,
Correspondent to the Hippocrat

COMMITTEE MEETINGS HELD AT HEADQUARTERS

Emergency Medical Service, November 15; Disaster Medical Care, November 14; Insurance, Labor Relations and Industrial Accidents, November 30; Public Health, Mental Health, and Rehabilitation, November 28; Health and Accident Insurance November 27.

For Information or Reservations for your Business or Pleasure trip contact:
WEIDNER TRAVEL BUREAU, Inc.
83 State Street — Springfield, Mass.
Tel. 781-0550

FRAN'S RESTAURANT
866 Main St., West Springfield
Italian and American Food
Open 6 A.M. to 3 A.M.
A meeting place for show people.

WHITE STREET PHARMACY
158 White Street, Springfield, Mass.
RE 2-5805
Dependable Prescription Service
Open All Day Sunday

DIABETES DETECTION WEEK

The week of November 11 - 17 was observed throughout the Nation as Diabetes Detection Week. Sponsored nationally by the American Diabetes Association, the Hampden District Medical Society co-sponsored the local drive together with the Springfield Public Health Department and the Springfield Druggists Association. This was the second such drive in this area.

During this week a program of publicity was carried out via all media. The public was invited to participate by sending to the Society a Dreypak filter strip which had been dipped into a urine specimen and allowed to dry. This filter strip was tested by students of the Springfield Trade High School under the supervision of the members of the medical sub-committee. At the present time, 2600 tests had been made and 67 positive tests had been recorded. Of these, 10 were of known diabetics. Reports of all tests will be sent to the participants and the positive results will be reported both to the individual and to his physician. The Auxiliary has assumed the responsibility of the clerical work involved in sending these reports.

On the basis of numbers alone, this drive can be considered as a successful effort. For the first time the drive included all the communities represented in the District Society. This campaign is for detection and education—to detect the unknown Diabetic, to alert the public to the manifestations of the condition, and to remind the unknown Diabetic of the need of continuous care and medical supervision.

In addition to the Chairman, Dr. Louis A. Izenstein, the subcommittee of the Public Health Committee consisted of Drs. John Maloney, Eoline Dubois, George C. Steele, Ellis Joffe, and Max Millman. The Chairman of the Public Health Committee is Dr. Norman Pokorny.

MEDICAL ETHICS

(From Report on Action of the House of Delegates, A.M.A., Nov. 25 - 28, 1962.)

"The Judicial Council submitted a report containing new opinions on the medical ethics involved in physician ownership of drug stores, drug repackaging houses and drug companies, dispensing of glasses by ophthalmologists, and advertising practices of medical laboratories. The House decided that the questions of physician ownership of drug stores, drug repackaging houses and drug companies, and the dispensing of glasses by ophthalmologists, should not be acted upon at this time. Those opinions were returned to the Judicial Council for further study and report. The House approved the portion of the report relating to advertising practices of medical laboratories and agreed that the propriety of such practices should be determined at the local level in compliance with the new opinion. The House also approved the rules of procedure adopted by the Judicial Council for disciplinary action in cases where the Association now has original jurisdiction as conferred by the June, 1962, change in the By-laws."

Old STORROWTON TAVERN

Old-Fashioned Food,
Drink and Lodging
Open Every Day
West Springfield, Mass.
Exit 4, Mass. Turnpike

ETHICS and WOLLEY SEGAP

Members of the Society are reminded of the action of the district meeting on September 25, 1962 when it was "resolved that Yellow Page telephone listing be limited to address, specialty, and office hours in the telephone directory of area where doctor's office or home is located, as advocated by the Judicial Council of the A.M.A."

An understanding of the stimulus for this recommendation of the Executive Committee, may be discovered in an article in the A.M.A. News in which is reported a paper on ethics delivered at the Annual Meeting in Chicago. The article stated that inconsistency in the manner of Yellow Page listing of physicians is widespread and varies from the bare statement of name, address, and telephone number to entries that may include one or two special listings, office hours, telephone numbers for calls after hours, and, by some, membership in the local medical society. The article went on to state that the necessity and the privilege of the people to look to the Yellow Pages for information about required services, including physicians services, is undeniable and well established by custom. However, the inclusion of extra information could be objectionable in certain circumstances. Mentioned were the possibility that an unqualified physician might list himself as a specialist; that specialty listings might encourage patients to guess at the kind of special service he might require; that the choice of a personal physician by this manner is undesirable; that physicians might list themselves in communities in which they did not practice.

The telephone company holds itself aloof. Internecine differences of opinion concerning practices in Yellow Page listing are not new to the telephone company, nor peculiar to medical societies. Special groups of artisans, such as master plumbers, through their respective trade unions, have sought legislative control of listings. A representative of the telephone company stated that some censorship is practiced by the company to maintain reliability of the information in the Yellow Pages but that this could not be reasonably extended to physicians' lists. In some cases, he pointed out, multiple listings in more than one telephone book may be not only indicated but desirable, such as when a doctor practices in a hospital situated between two cities or, as in Greater Boston, where his area of influence might reasonably overlap the area

SIXTY-THREE BUICK SIXTY-THREE

FULL SIZE - MEDIUM SIZE - RIVIERA

VALLEY BUICK, INC.

683 Columbus Ave., Springfield, Mass.

covered by more than one book.

While a good case may be made pro and con, members are urged to consider the resolution an appropriate measure toward the preservation of the dignity of the medical profession. The extent to which the practice of multiple listings has grown is evident in an examination of the telephone books for the Holyoke and Westfield areas, where, in the first instance 57 physicians, in a list of 138, practice in other communities. In Westfield a person looking to the Yellow Pages for the selection of a physician must sift out 48 "outsiders" from a list of 78.

Obviously many of the superfluous listings are those of specialists who ordinarily look to other doctors for referrals and are seldom chosen by the patient directly. To those the new rule is of little disadvantage. For other physicians, with a good reason, an exception might be in order. The rest of us are urged to insure that the next printing of the Yellow Pages will carry listings that are in complete accord with the resolution and in the future to "extend our fame by deeds."

Holleran

CROTTY DRUG STORE
78 Elm Street — Westfield, Mass.
LOgan 2 2644
Over Half a Century
Serving Westfield People

COMPLIMENTS
T. P. Sampson Co.
Springfield

ASTHMA–
A CLASSIC INDICATION
FOR HALDRONE®
(paramethasone acetate, Lilly)

Haldrone produces rapid remission in asthma and controls the patient with relative freedom from side-effects. In recommended dosage, Haldrone is unlikely to cause sodium retention and has little or no effect on potassium excretion.

Suggested daily dosage for asthma:
Initial suppressive dose . . 6-12 mg.
Maintenance dose . . . . 2-6 mg.

Supplied in bottles of 30, 100, and 500 tablets: 1 mg., Yellow (scored), and 2 mg., Orange (scored).

This is a reminder advertisement. For adequate information for use, please consult manufacturer's literature. Eli Lilly and Company, Indianapolis 6, Indiana. 240121

Lilly

MEDICO-RELIGIOUS COMMITTEE

The following is a report of the activities of the Medico-Religious Committee. The Hampden District Medical Society, in line with similar movements throughout the country, is endeavoring to develop a sense of fellowship with the clergy. Mr. Donald A. Simpson, a former chairman of the Hospital Chaplaincy Committee of the Springfield Council of Churches stated that "the point and purpose for such an affair would be to acquaint men of medicine and men of religion with one another and their ideas. Often they work closely and yet without acquaintanceship in the care of persons ill and convalescent". Dr. LeRoy J. Rendrew, former Chairman of the Medico-Religious Committee of this District performed a good deal of ground work in the development of this Committee.

Members of this Committee at present, in addition to the Chairman, inlude Dr. Garry Hough, Jr., Dr. Charles Teta, and Dr. Lewis Isenstein. Our objective is to bring together both the doctors and clergy of the various faiths and to evolve a set of guiding principles to help us fortify the spiritual strength of those patients whose will to live has all but disappeared; and to give spiritual courage to those who are to depart. Our second objective, that if comradeship with the clergy, from a very selfish point of view, is highly desirable. The clergy are in the position to help us in many ways. Very often they can assist a family and a patient with important decisions relative to their health. Often they render a considerable amount of psychotherapy. Indeed, part of the training of the newer clergy does involve psychology and psychiatry, I am told.

The Hospital Chaplaincy Committee of the Springfield Council of Churches took the initiative to bring the doctors and clergy together. On November 7, 1962, various clergy invited their doctor friends to a dinner meeting at the Oaks Rib Steak House. The guest speaker was Dr. John Milton Billinsky Guiles, Professor of Psychology and Clinical Training, Andover Newton Theological School. In his address, entitled "Religion and Health," he traced the very close relationship between physicians and the clergy, and closed his eloquent address by asking closer cooperation between the two professions.

In the coming months it is the desire of this Committee to bring the doctors and the clergy of the various faiths together, both in informal meetings and in panel discussions.

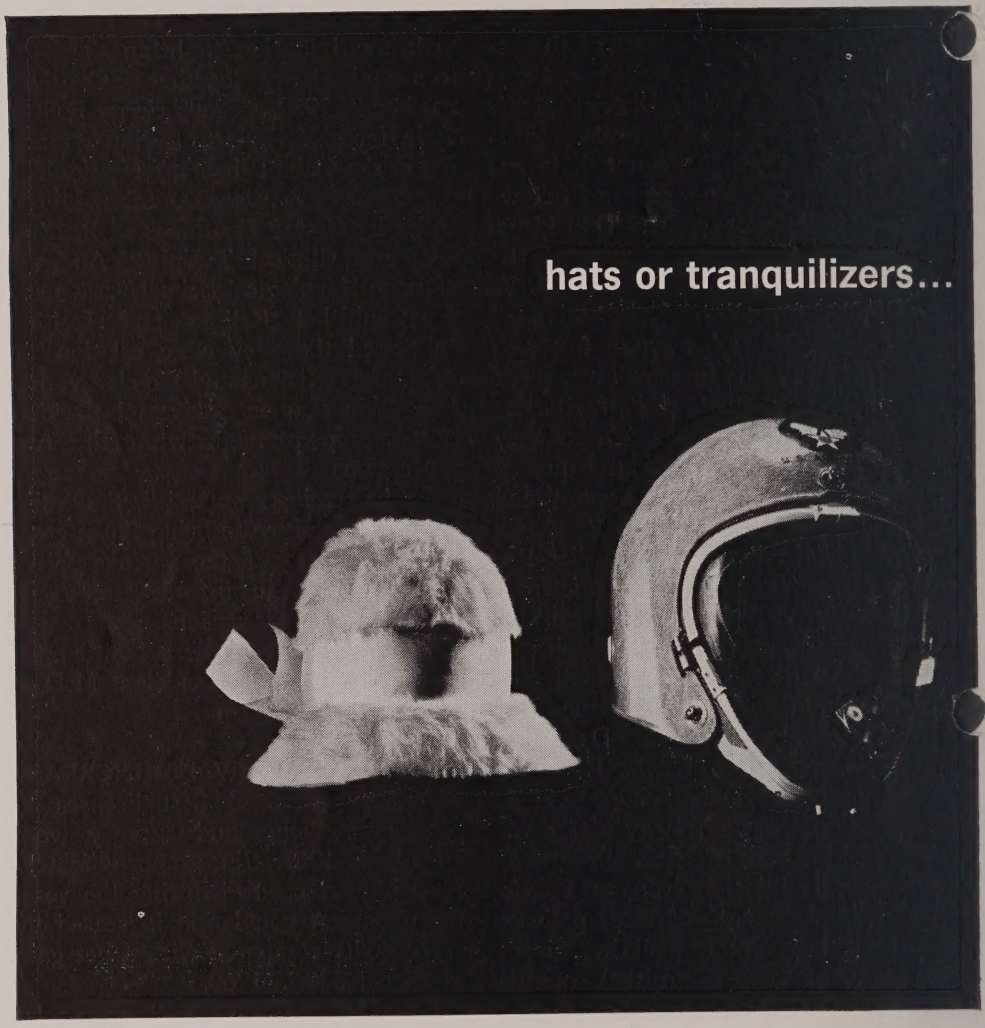
Respectfully submitted,
John J. Bandeian, M.D.
Chairman

PHYSICIANS SHOW 4500 INCREASE

A total of 8023 first licenses to practice medicine and surgery were issued in 1961. Since approximately 3500 physicians died during the year, the physician population increased by about 4500, compared with a net gain of about 4330 in 1960.

Of 8714 applicants for licensure by written examination, 7650 passed while 1064 (12.2 per cent) failed, the report showed. However, the rate of failure in approved medical schools was 2.8 per cent. Twenty-six approved schools had no failures among their graduates.

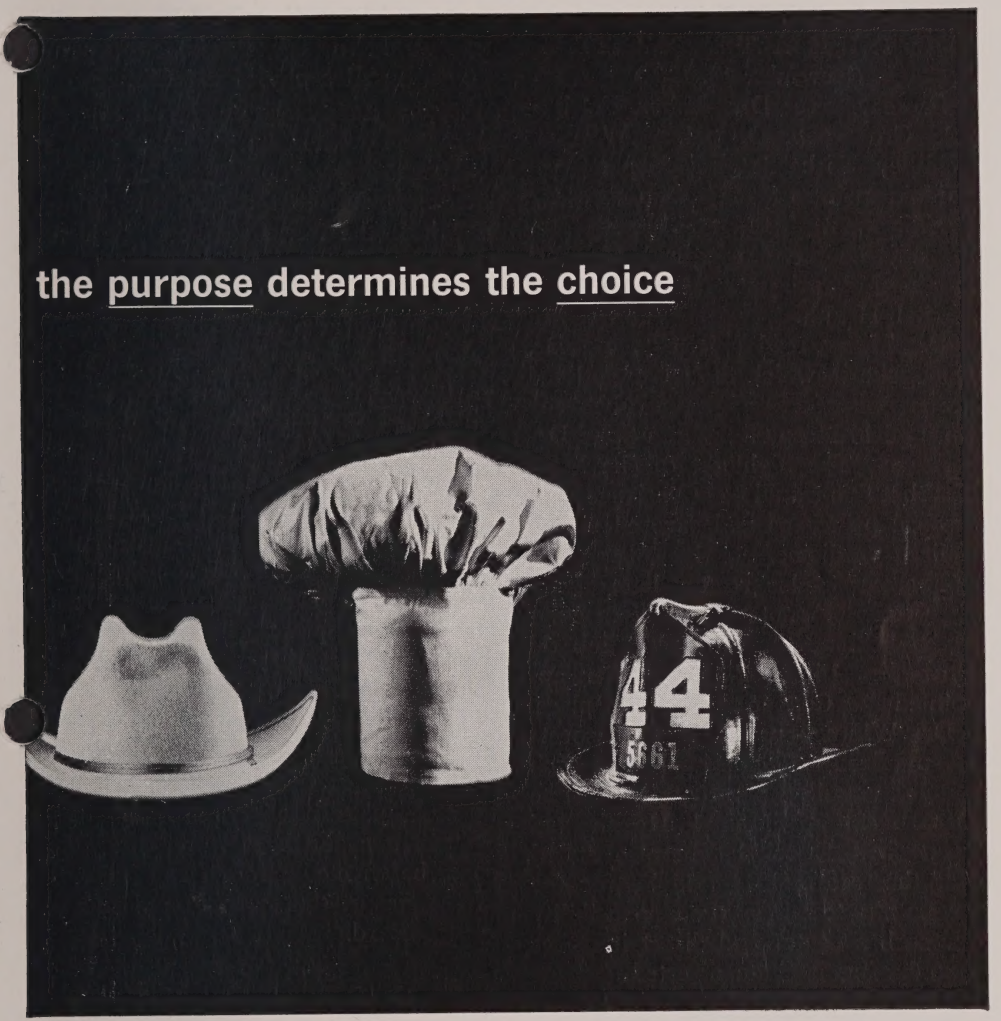
AUTO CENTRE
Cor. Mill & Locust Street
Springfield, Mass.
For Service During Office Hours
Phone 736-9625



to alleviate cardiac anxiety

IN BRIEF Vistaril, hydroxyzine pamoate (oral) and hydroxyzine hydrochloride (parenteral), is a calming agent unrelated chemically to phenothiazine, reserpine, or meprobamate. Vistaril has antinauseant and antiemetic properties, and has been shown to lower narcotic requirements by as much as 50 per cent when administered preoperatively and prepartum. Its usefulness in relieving anxiety, apprehension, or fear—occurring alone or in association with physical disease—is enhanced by the fact that no toxicity has been reported from its use under proper techniques at recommended dosages, and by its remarkable record of freedom from serious side effects. Drowsiness, usually transitory or correctable by dosage reduction, may occur in some instances. Dryness of mouth may occur with higher doses. Its potentiating action should be taken into account when Vistaril is used in conjunction with anticoagulants and central nervous system depressants. Intravenous injection of Vistaril should not exceed a rate of 1 cc. per minute or 100 mg. per dose. For complete information on Vistaril dosage, administration, and precautions, consult package insert before using. More detailed professional information available on request

Science for the world's well-being® Pfizer **PFIZER LABORATORIES** Division, Chas. Pfizer & Co., Inc. New York 17, New York.



Vistaril® is a specific choice

In addition to the calming action you expect from an effective tranquilizer, Vistaril provides extra benefits specifically for the cardiac patient.

- ☐ unsurpassed record of safety
- ☐ mild sedative action
- ☐ reported beneficial effects in arrhythmias of acute onset and short duration
- ☐ compatibility with digitalis
- ☐ excellent control of nausea and vomiting
- ☐ reduction of analgesic and narcotic dosage on parenteral administration

VISTARIL Capsules and Oral Suspension, hydroxyzine pamoate / **Parenteral Solution,** hydroxyzine hydrochloride

REPORT OF MENTAL HEALTH COMMITTEE
(November 13, 1962)

Present were: Drs. Miller, Polchlopek, Greenspan, Donoghue, Wheeler, Whitney, Richards and Cooper.

Main point of discussion was the establishment of a Mental Health Center adjacent to Springfield Hospital by the Massachusetts Department of Mental Health.

Dr. Miller read a letter from Dr. Donoghue in which the latter outlined the hazards of a possible union between Springfield Hospital and the State Department. The highlight of the letter was that this would be at variance with medical principles and savored of socialized medicine.

There was also read a letter from Dr. Robert Arnot regarding meeting to be held at the Harvard Club on November 14, 1962. Dr. Miller appointed Dr. Cooper to go in his place.

Dr. Whitney presented the aspects of socialized medicine implied in such a union as might eventuate with State Department of Mental Health and Springfield Hospital. He also stated that the ideal plan would be for the community to assume the responsibility for such a center and direct it rather than having it State directed.

Dr. Miller referred to a similar situation in Lowell in which the State plans to erect a Mental Health Center, man it, and run it. Dr. Miller stated that the State Society voted not to sponsor such a plan — due to the fact that it symbolized State medicine.

Dr. H. Solomon's talk to the Academy was called to the attention of the Committee and questions for Dr. Solomon were formulated. The essence of these were: what influence would the State have in this program? What would be the relationship between State and local direction? Most of all, who would formulate the over-all policies and philosophy of the Clinic?

Dr. Whitney suggested another question for Dr. Solomon: what would be the possibility of setting up an organization similar to the Alcoholic Clinic in which the responsibilities are centered in the community and subsidy provided by the State.

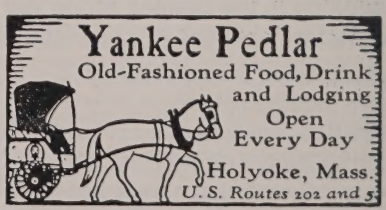
All members present concurred that any medical program—while it could be subsidized by the Government—should be administered and directed locally.

The comment was made that psychiatry, placed in a general hospital, under proper auspices would have many advantages—one of them being the possibility of alleviating the current and acute manpower shortage through a program of training medical men in the fundamentals of psychiatry.

Dr. Greenspan expressed the belief that we should have an area psychiatric program situated in a general hospital under a pattern of collaboration between State and local resources. This could be effected through appointment of trustees of that hospital and an advisory board.

It was suggested that this also be put in the form of a question to Dr. Solomon during his meeting tonight at the Academy.

Olive A. Cooper, M.D., Chairman



Medical Ethics

(continued from page 2)

nosis if the patient is not in a condition to accept this responsibility. Relative to this elusive entity, Truth, the attending "physician should seek consultation upon request in difficult or doubtful cases, or whenever it appears that the quality of medical service may be enhanced thereby".

Fair Charges for Services Rendered: "The physician's fee should be commensurate with the services rendered and with the patient's ability to pay." Misunderstandings and recrimination can usually be avoided by discussion of the probable cost of services before they are rendered. The customary remuneration for similar services in the doctor's community is a useful guide but prestige and experience are recognized as modifying factors. Even as the patient is entitled to fair financial treatment, so is the workman worthy of his hire; and the "physician should not dispose of his services under terms or conditions which tend to interfere with or impair the free and complete exercise of his medical judgment and skill or tend to cause a deterioration of the quality of medical care." Nor should he receive additional compensation secretly or openly, directly or indirectly, from any other source whether it be a "kickback" from a commercial firm serving the patient or a token of gratitude from the specialist to whom the patient was referred. Since it is usually unwise for a physician to treat one of his own family it is traditional that he care for the economic dependents of his colleagues without charge. But the Judicial Council has ruled that it is proper to accept remuneration by a third party such as an insurance company.

The Doctor's Relation to his Fellow Practitioners

"Their conduct toward each other should be such as to secure mutual confidence and good will". Two of the greatest obstacles to this goal are patient stealing and ill-advised criticism of colleagues which may occur under the following conditions:

Emergencies: If more than one doctor is called, the first to arrive is in charge of the case. As soon as the emergency has been dealt with he should offer to withdraw in favor of the patient's regular physician.

Temporary Coverage at the request of the physician: Here it is mandatory that the pro tem attendant withdraw in favor of the referring physician when the latter becomes available unless the latter specifically requests that the substitute continue in attendance. The same protocol governs the assumption of responsibility by a consultant. When, if ever, the substitute physician may accept this patient without specific authorization by the regular attendant is a moot question. Certainly not during the current illness for which he was originally engaged. Certainly not until he has demonstrated that the patient was returned in good faith to

Nagle Pharmacy
69 SUMNER AVENUE
RE 2-8906
Albert Kohn, *Reg. Pharmacist*

GEORGE ST. PIERRE & SON
FUNERAL HOME
576 State Street - Springfield, Mass.
Tel. RE 6-4100

the referring physician. Probably not until sufficient time has elapsed to exonerate the substitute physician from the suspicion that he connived at the alienation of the patient's loyalties.

Change of Physicians: The patient has a right to change doctors but the new attendant must not take charge or prescribe until the attending physician has relinquished the case or has been dismissed. The latter should furnish essential clinical data to his replacement with as good grace as he can muster. The same courtesy should be accorded his successor when for some reason the attending physician wishes to relinquish the case. Here the patient or responsible relative must be given sufficient warning so that a replacement can be secured before the attending physician's responsibilities are ended. Change of doctors is a prolific source of misunderstanding, snide innuendo, and frank criticism which usually can be prevented by the exercise of tact, charity, and superhuman self-control. These Olympian qualities are easier to invoke if it is remembered that shaking a patient's confidence in one doctor shakes his confidence (if only subconsciously) in all doctors and therefore indirectly in you.

Social Contacts with another Doctor's Patient can be a source of embarrassment unless the doctor not in attendance assiduously avoids all discussions of the patient's medical problems and, if possible, of such problems in the abstract. If the object of a purely social call is ill at home or in the hospital, the visitor may avoid misunderstanding by asking the attending physician if the patient is well enough to have a social caller.

Ghost Surgery consists of the attending physician's hiring a surgeon to operate, paying him for the service (all unbeknown to the patient), and then charging the patient as if the attending physician had actually performed the operation. The flagrant dishonesty of such practice hardly needs comment. Less easily defined are the moral issues involved when a resident in training is allowed to operate on the attending surgeon's private patient as a part of the educational program of the hospital. The lid has already been lifted on this Pandoras Box and the issues are a complex of grays rather than of blacks and whites except for the general agreement that the patient must be clearly informed of such intent.

Disputes between Physicians: Just as a physician should "observe all laws,

COMPLIMENTS

Ernest A. Byron

SPRINGFIELD

GLOBAL TRAVEL AGENCY, Inc.

Serving you with all modes of travel and accommodations for business and pleasure.

1 COURT ST. — WESTFIELD, MASS.
LO 8-8277

OVERWEIGHT?
THE ANOREXIC THAT'S DIFFERENT:
NO REPORTED CONTRAINDICATIONS
TENUATE®

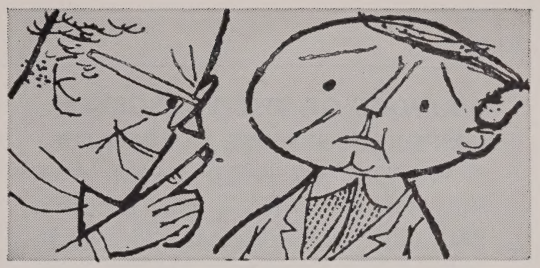
uphold the honor and dignity of his profession, and accept its self-imposed disciplines" so also is he obligated in the public interest to expose incompetent, corrupt, dishonest, or unethical conduct on the part of another physician. This must not be the basis of public vendettas. Such problems, like disputes between physicians, must be submitted to properly constituted medical tribunals. Even when he believes that a crime has been committed, it is wiser to channel his suspicions thru the appropriate medical society committee to the proper legal agency.

The Doctor's Relation to the Public

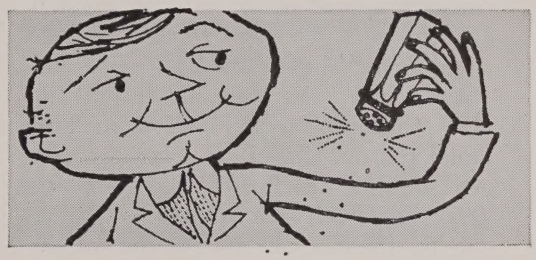
"Physicians should encourage sound medical learning and uphold in the community the correct views of the powers and limitations of science and the art of medicine." The avid interest of today's public in medical matters has created many opportunities for honest enlightenment as well as for adroit self-advertisement by the physician. Such subtle (as well as frank) solicitation of patients is unethical. The Mass. Medical Society has formulated a Publicity Guide which should be consulted by any doctor who plans to address a lay group on medical matters or to communicate with press, radio, or television. In essence it demands that such a communication first be cleared with the chief of the doctor's hospital service, or with the head of his department in a teaching or research institution, or with the appropriate committee of his District Medical Society. Modesty of presentation is desirable and the preservation of anonymity when possible will prevent any accusation of self-advertising.

#

TOBER FOREIGN MOTORS, INC.
676 Belmont Avenue
Sweden's SAAB - VOLVO
and now
the LARK and HAWK
By Studebaker
RE 7-6333 Open Evenings



when you tell your patients **no salt**



put zest into their food...

with

co-salt

sodium-free salt substitute

CO-SALT fully satisfies the patient's craving for salt . . . because it tastes, looks, sprinkles exactly like salt. Thus, patients with congestive heart failure, toxemias of pregnancy, hypertension, and obesity who should limit sodium intake, will adhere more closely to the diet with Co-Salt.

Contains no sodium, no lithium . . . never bitter or metallic in taste. For use at table or cooking.

ingredients: Choline, potassium chloride, ammonium chloride and tri-calcium phosphate.

supplied: 2 oz. shaker top package, 8 oz. economy size.

professional samples on request

u. s. vitamin & pharmaceutical corp.

Arlington-Funk Laboratories, division
250 East 43rd Street, New York 17, N. Y.

REPORT OF THE EMERGENCY MEDICAL SERVICE COMMITTEE

For the five-month period from June through October, 1962 inclusive, 660 calls came through the switchboard of the Emergency Medical Service. Five hundred and ten calls of a medical nature and 55 calls of a dental nature were processed for the Springfield area. Eighty medical calls and two dental calls were processed for the Chicopee area. Twelve medical calls and one dental call were processed for the Ludlow-Indian Orchard area. No such information is available for the Holyoke area, as the switchboard handling in the Holyoke area has not started on the same processing of statistics as the Springfield area.

Of the 510 calls from the Springfield area, 66 of these calls were purely informational, such as requests for medical advice, diagnosis, treatment, known alcoholics and drug addicts, or calls to referee family disputes. Further, 231 calls came from patients who had their own doctor or who were under active medical treatment by their own doctor at that particular time, but who, for various reasons, called the Emergency Medical Service either in panic or on advice to call the Emergency Medical Service, for "faster and more efficient service". Again there were calls to the Emergency Medical Service "because my doctor never makes house calls". Seventy-nine calls were referred directly to the Emergency Rooms of the various hospitals and 12 of the calls were of such a nature that an ambulance was dispatched directly without consultation with a doctor. Thus, only 64 calls were referred to the doctor on call, but at the present time no means are available to determine how many house calls were actually made after referring the call to the doctor on the roster.

There has been a healthy increase in the number of physicians now taking their own tour of duty. Two hundred and four doctors are on the active roster and 130 of these doctors now take their own tour of duty. Substitutions have devolved on the "so-called younger men of the Society" with Doctors Angelica, Greenspan, LaBrecque, Macchiaroli, Sheffield and Slosberk taking a tour of duty five or more times during this period.

An ever-recurring complaint to come through the Emergency Medical Service switchboard is the inability of the patient to obtain the home service, especially of pediatricians. This problem is a vexing one and delicate to handle by the girls on the switchboard, as it involves public relationships between patients and physicians. Serious attention to this problem and further consideration of it by the Society at

ESTABLISHED IN 1861
FUNERAL SERVICE
Dickinson-Streeter Co.
Springfield, Mass.

CHESTER'S DRUG STORE
MEDICAL CENTER
305 Appleton St., Corner Maple
HOLYOKE, MASS.

CARROLL TRAVEL BUREAU
INC.
Johnson's Bookstore Building
1383 Main St. — Springfield, Mass.
RE 9-7391
A Complete Experienced Travel Service

large seems to be indicated as it is the most repeated situation and a touchy point all around. Likewise, frequent requests for "list of physicians who make house calls" seem to be foremost in the qualifications of the man whom the community at large seek in their choice of family physician.

The additions and enlargement of this committee this past year has resulted in enlarging the scope of activities of the committee and increasing the ease and efficiency in its administration.

Peter S. Zarecki, Jr., Chairman

The California Medical Association and two county medical societies recently took an unusual stand in court. They opposed an M.D. who had sued the parents of a 17-year-old girl to collect a $125.00 fee for applying a short knee cast after the girl sprained her knee in a skiing mishap. Witnesses from the C.M.A., the Sacramento County and the Placer-Nevada medical societies appeared in behalf of the girl and her parents, arguing that the doctor's fee was too high. The judge denied the doctor's claim, but not on the basis that it was an overcharge. He ruled that the girl's parents could not be held liable for a contract made with a minor. Said a spokesman for the C.M.A.: "We advise patients not to pay exorbitant fees but to wait for the doctor to bring suit. Then we will supply legal counsel and professional witnesses in behalf of the patient."

"YOU'RE SUFFERING FROM A GUILT COMPLEX OVER THE $725 YOU OWE ME!"

Courtesy Medical Society Magazine Group

WHO IS THE A. M. A.?

From some of the comments sometimes heard, one might think the A. M.A. is some kind of a despotic foreign power with all kinds of evil designs on the unsuspecting physician. These misinformed critics, while only a minority, are most painful to endure. As physicians they should know more about this great organization which has done so much for the health of America, for medical education, and for the practicing physician.

Who is the A. M. A.? The answer is simple. It is all of us. It represents the physician, and speaks for its members, at the same time benefiting non-members. It is without question as democratic an organization as any large association of 181,000 physicians can be. Policies are determined by the House of Delegates, whose members are elected by their respective state medical societies. Policies in our own state, in turn, are determined by the Council of the Massachusetts Medical Society, whose members are elected by the various district societies. Even then, major decisions are referred to the annual meeting, where every member has a voice and a vote. The individual member always has the right to express his views at the meeting of the Hampden District Medical Society, and if he can convince his colleagues, his point of view will be carried up through the proper channels to the House of Delegates of the A. M. A. In fact, he can even do more. He has the right to appear personally before any of the reference committees of the A. M. A. to discuss any resolution up for consideration.

Meanwhile, the physician who refuses to join the A. M. A., or who joins but does not participate in its affairs and then criticizes it without knowledge of the facts, is accomplishing nothing more than adding fuel to the arguments of politicians who oppose organized medicine, while endeavoring to destroy the private practice of medicine as we know it.

Yet, important though they are, the activities of the A. M. A. along legislative lines are only about 6 per cent of its budget. It is not primarily a large legislative body, but it must be interested in sound health legislation. Along these lines, in spite of what its

Luncheons - Dinners - Cocktails
WILLOW GLEN HOUSE
East Longmeadow, Mass.
232 North Main St. - Tel. 525-2167

SHAKER FARMS COUNTRY CLUB
DINING ROOM — BALLROOM
DANCING EVERY SATURDAY NIGHT
Accommodations Up to 600 Persons
DINNERS — LUNCHEONS
BUFFETS
We Specialize in Parties
For All Occasions
Telephone Party Hostess: ST 3-3032
LOgan 8-0941
SHAKER ROAD
WESTFIELD, MASS.

critics say, the A. M. A. has supported more bills than it has opposed.

It is not in any sense a union, as indicated by the number of non-member physicians in practice who are not penalized by their non-membership, this, notwithstanding ex-Secretary of Health, Education, and Welfare Ribicoff's ill-informed accusation that the A. M. A. exercises "very strong sanctions against individual doctors who speak up their mind."

What, then is the A. M. A.? It is a voluntary association of physicians which was organized to advance the science and art of medicine for the benefit of the health of America. It is the voice of the medical profession. Throughout the years it has endeavored to improve standards of medical care by improving standards of medical education. Since 1847, when it was organized with a membership of 250 physicians, it has grown to a membership of 181,000, with an annual budget of more than 17 million dollars, and a staff of 700, performing a variety of functions. It is big, but big in the best sense of the word, representing the health growth of a society which has done its job well.

What benefits accrue to the physician for his A. M. A. membership? For his annual dues of $35.00, he receives: (1) The **J. A. M. A.** weekly, (2) a choice of any one of 10 special journals monthly, (3) the **A. M. A. News** biweekly, (4) **Today's Health** written for laymen for his reception room, (5) admission to two large annual post-graduate meetings, (6) consultation service through the **J. A. M. A.**, (7) authoritative information on new drugs, foods, nutrition, physical medicine, cosmetics, poisons, etc., (8) lists of internships and residencies, (9) lists of post-graduate courses, (10) pamphlets on health education subjects for patients on a wide variety of subjects, (11) medico-legal literature, equipment suggestions, and other practice aids, (12) a placement service for physicians, (13) loan of medical films for use with lectures on scientific subjects or talks to laymen on health subjects, (14) investigation of quacks and nostrums, (15) a library reference service and other materials, and (16) the satisfaction of supporting his own professional organization for the benefit of himself and his patients.

These are but a few of the values that we get in return for our dues. Of even greater significance are the A. M.A.'s historical contributions to the advancement of medicine in general.

It was the A.M.A. that cleaned out the diploma mills and the un-approved medical schools. Also, it was the A. M.A. that helped defeat socialist-tainted legislation such as the Wagner-Murray-Dingle, the Forand and the King-Anderson bills. And finally it was the A.M.A. that gave us the Principles of Medical Ethics, without which the practice of medicine even today would be a wasteland of charlatanry, humbug, and quackery.

In short the physician is the A.M.A. The A.M.A. can do only what the physician member wants it to do, no more —no less. Tillman

HAFEY'S
FUNERAL SERVICE
494 Belmont Avenue
Springfield, Mass.

Patronize our advertisers and remember to mention the Hippocrat.

THE ETHICS OF HUMAN DRUG TESTING

Spurred by the thalidomide tragedy and the Kefauver investigation the U. S. Food and Drug Administration proposed recently a series of new regulations the most important of which (at least as far as we are concerned) is that physicians obtain consent from patients on whom they wish to try experimental drugs. This mandate, however, may be waived in cases "where obtaining such consent would not be feasible, or in the professional judgement of the investigator would be contrary to the best interest of the patient".

As far back as 1956 the A.M.A.'s Judicial Council, as if anticipating the recent F.D.A. proposals, took a stand on drug testing that was approved by the House of Delegates. "In order to conform to the principles of medical ethics of the A.M.A., three requirements must be satisfied", the council stated. **First,** voluntary consent must be obtained from the person on whom the experiment is to be performed. **Second,** the danger of each experiment must have been investigated previously by means of animal experimentation. And, **finally,** the experiment must be performed under proper medical protection and management.

The A.M.A. further advises physicians to "confine clinical investigation of new drugs to those furnished by reputable sources who have supplied comprehensive written information concerning animal experimentation, previous clinical investigation, recommended dosage, contraindications, possible side effects and the safety and possible usefulness of the drug from existing data".

Is human drug testing necessary? Not only is it necessary, it is, in fact, indispensable. Drugs metabolize and act differently in different animal species making it extremely difficult to extrapolate results of animal experiments to man. Morphine, for instance, depresses man but stimulates the cat. Even more difficult is to project drug toxicity from animal to man. A good example is thalidomide, which apparently showed no teratogenic effects in the experimental animal. Human testing, therefore, would seem to be essential to the advance of medical science. The A.M.A. and the pharmaceutical industry were given time by the F.D.A. to offer suggested changes. Ways and means will unquestionably be found to safeguard the public and the physician without at the same time hindering pharmacalogic research and progress. Time will tell.

In the meantime, we will all do well to abide strictly by the recommendations of the A.M.A. and its Judicial Council.

Millman

ASCOT
TRAVEL SERVICE
Airlines - Steamships - Resorts
VICTORY THEATRE BLDG.
Holyoke
JE 4-3394 4-3395 4-3396

FLITTNER DRUG CORP.
228 Eastern Avenue
SPRINGFIELD, MASS.
RE 4-1765
Open All Day Sunday

Compliments
TAZZINI FUNERAL HOME
Springfield

PUBLICITY GUIDE of the MASSACHUSETTS MEDICAL SOCIETY

(Adopted 1949, Revised May 22, 1961)

Preface

In reporting the medical news, representatives of the press, radio and television look to physicians for accurate and authoritative information. It is recognized and accepted that the physician serving as a source of information will, in most instances, be quoted and identified.

When so serving as an authority, a physician should conform with ethical decisions reached by the staffs of hospitals with which he is affiliated and by the professional organizations to which he belongs. In all cases the emphasis should be placed on the service rendered and work done rather than on the identified fellow.

The following guide is designed to serve as a reference for fellows of the Massachusetts Medical Society in their relation with the press, radio and television. A fellow in doubt concerning the propriety of his actions relative to matters of publicity not covered in this guide should refer his problem to the appropriate committee of his district society or to the Committee on Ethics and Discipline of the Massachusetts Medical Society.

Radio, Television and Recordings

(1) A fellow invited to appear as a representative of the Society on programs not sponsored or arranged by the Society should first obtain approval from the Society. Requests for such approval should be forwarded to the Secretary, Massachusetts Medical Society, 22 The Fenway, Boston 15.

(2) A fellow need not obtain approval from the Society for radio or television appearances in the following instances:

(a) In a capacity other than a practitioner of medicine (e.g., as medical examiner, civic club officer, public health official, school board member.)

(b) As a representative of a staff of a hospital, dispensary, sanatorium or clinic. His appearance should be approved by the chief of staff or the chief of the appropriate service and by the director.

(c) As a representative of a medical school or medical society other than the Massachusetts Medical Society or any of its constituent district medical societies. His appearance should be approved by the appropriate authority in the medical school or medical society.

Press

(1) A fellow acting in a capacity other than as a representative of his profession does not require approval from the Society for newspaper articles and statements that he may be requested to write or make

Dine in
Relaxed Elegance
Always a different and delicious menu to enjoy in pleasant comfort. Serving daily from eleven-thirty AM to midnight.
THE LOG CABIN
Easthampton Road, Route 141
HOLYOKE
JEfferson 9-9137

in connection with his responsibilities as a citizen.

(2) A fellow serving as a spokesman for a medical school or professional group other than the Society or any of its constituent district societies should obtain approval for newspaper articles, statements or interviews from the group that he is representing.

(3) A fellow asked to report for the press on research that he has done, findings that he has made or other newsworthy matters connected with his practice should first obtain permission from (1) the chief of staff or appropriate service of the hospital and hospital director, (2) the head of a major department or research organization, or (3) the dean of a medical school or someone specifically designated by him for this purpose.

(4) A fellow speaking on professional subjects at meetings sponsored by medical organizations may consent to interviews with the press arranged by the organization.

(5) A fellow should not release information to the press on matters pertaining to his district or state society without prior approval from the appropriate committee or officers.

(6) A fellow in announcing the establishment of his practice should adhere to the custom established by precedent in his community.

(7) A fellow in his statements, articles and interviews with the press should avoid excessive mention of his professional qualifications in identifying himself.

Press, Radio, Television Coverage of Hospitalized Patients

In the release of information to the press, radio or television relative to hospitalized patients a fellow should follow, where they are applicable, the appended Principles of Hospital - Press - Radio - TV Cooperation of the Massachusetts Hospital Association.

Talks Before Lay Groups

A fellow requested to speak on medical subjects before a lay group should be governed by the principles outlined in this guide.

A fellow whose statements have not been approved by the proper authorities as defined in this guide will be held responsible for the content and accuracy of such statements.

COVER: Designed and sketched by Dr. Edward P. Bagg.

MAPLE HILL NURSING HOME
156 Mill Street — Springfield, Mass.
RE 7-2148
JOEPH M. JOSEPH, Administrator

SOUND SCRIBER
T. E. Skinner Associates
Springfield, Mass.
121 Chestnut Street
REpublic 4-8143
Hartford, Conn.
692 Maple Avenue
JAckson 7-8000
Now, for the first time, a system has been developed ideally suited to the complex requirements of medical record-keeping. Case histories, observations, diagnoses and reports can be recorded on the spot.
departmentalized medical record dictation at low cost

OUR JUDICIAL SYSTEM

GRIEVANCE COMMITTEE IN SESSION

Left to right: R. T. Miller, President; M. B. Murray, Vice-President; L. G. Suzor, H. N. Memery, J. J. Bandeian, J. A. Whitney, Past President; H. P. Kennedy.

The judicial system of the medical profession comprises 4 categories or grades, each with its own jurisdiction and each with its own specific duties and responsibilities. These are outlined explicitly in the by-laws of the H.D.M.S., the M.M.S., and the A.M.A. The purpose of this elaborate system is to enforce rigidly the tenets of medical ethics and at the same time to safeguard the rights, privileges, and prerogatives of each individual concerned.

I, H.D.M.S.

The Grievance Committee
(Chapter VII, Sec. 2)

The Grievance Committee "shall concern itself with grievances against members in accordance with rules suggested by the Committee on Ethics and Discipline of the Massachusetts Medical Society, which are as follows:

(1) Only complaints in writing should be received.

(2) Copies of such letters should be sent to the physicians involved for their consideration.

(3) Matters of medical ethics that might result in deprivation of membership should be referred to the State Committee on Ethics and Discipline.

(4) Disagreements regarding fees should be adjusted by district committees as far as possible. Where settlement cannot be reached, the matter should be referred to the Committee on Ethics and Discipline."

II, M.M.S.

(a) Committe on Ethics & Discipline
(Chapter VII, Dec. 10)

"The Committee on Ethics and Discipline shall consist of five fellows.

It shall investigate and consider, either on charges submitted in writing or on its own initiative, any alleged or apparent offenses by any fellow, as provided in Chapter I, Section 9.

It shall either admonish him, or recommend to the Executive Committee of the Council that he be placed on probation, or request his resignation or report its findings to the President with its recommendations, if as a result of its investigations and after a hearing of which the fellow has been duly notified, the committee finds that he is guilty of such offense.

The President acting on such recommendations shall (a) censure the fellow, or (b) refer the matter to a board of trial, as provided in Chapter VII, Section 2.

A member of the committee shall act as prosecuting officer in cases that come before a board of trial."

(b) Board of Trial
(Chapter VIII, Sec. 2)

"A Board of Trial shall consist of five of the commissioners of trial, appointed by the President to consider charges against a fellow recommended for trial by the Committee on Ethics and Discipline.

The President shall designate a time and place for the meeting of such board, and shall cause due notice thereof to be given to the complainants and to the accused, and to all members of the district society of which the accused is a member.

A Board of Trial may hear fellows who appear in the interest of the accused, but legal counsel shall be excluded.

Failure of the accused to appear or be represented at the trial shall be considered prima-facie evidence of the truth of the charges, and a verdict may be rendered accordingly. In case of conviction, a board shall recommend such sentence as it shall deem best, as provided in Chapter VII, Section 10. The Secretary shall enter on the records the proceedings of each Board of Trial, and shall report them to the Secretary at the next annual meeting for final action.

The Secretary shall notify the accused of the findings of a board of trial and of the action of the Society thereon; and he shall notify the several district societies of the sentence imposed."

III A.M.A.

Judicial Council

The "Court of Last Resort" is A. M.A.'s Judicial Council, occasionally referred to also as the "Supreme Court of Medicine." This was established in 1873, succeeding the Committee of Ethics. The Judicial Council answers annually hundreds of questions posed to it by individual physicians or medical societies.

In addition to rendering opinions on specific cases brought to its attention, the Judicial Council is authorized, at its descretion, to "investigate general professional conditions and all matters pertaining to relations of physicians to one another or to the public."

The Judicial Council consists of 5 members, elected by the A.M.A.'s House of Delegates, on nomination by the president of the A.M.A. Terms are for 5 years—but most members generally serve two terms.

If it is newsworthy and medical, the Hippocrat would like to hear about it.

ACADEMY

At the January 8th meeting of the Springfield Academy of Medicine the speaker will be Dr. Thomas F. Frawley, Professor of Medicine and Head of sub department of Endocrinology and Metabolism, Albany Medical College of Union University, Albany, New York. His topic will be "Early Recognition of Endocrinopathies". The clinical conference will be held at the Wesson Memorial Hospital, 5 p.m.

At the February 12th meeting the speaker will be Gordon S. Myers, M.D., Clinical Assistant of Medicine, Harvard University School of Medicine. His topic will be "Cardiovascular Disease". The Clinical Conference will be held at the Mercy Hospital, 5 p.m. This meeting is being co-sponsored by the Western Chapter of the Mass. Heart Association.

The following were elected to membership at the November Academy meeting:

George J. Bronos, M.D., Holyoke; Ralph Levin-Epstein, M.D., Holyoke; Isak O. Meshulam, M.D., Chicopee Falls; Paul T. Moore, M.D., Springfield, and Bernard J. Niemiro, M.D., Holyoke.

Visit and Use Our Academy Library

Library hours are Monday through Friday, 9:30 A.M. to 5:00 P.M., except Tuesday when the hours are 1:00 P.M. to 8:00 P.M.

Join and Support the Academy

PATRONIZE OUR ADVERTIZERS

RENTALS

E J AUTHORIZED DEALER
EVEREST & JENNINGS
Wheel Chairs
SALES

Walkers
• Hospital Beds • Patient Lifts
Complete Service on Wheel Chairs
EXPERIENCED 24 HOURS
Forest Park
AMBULANCE SERVICE
Est. 1947
86 ALBANY ST.
SPRINGFIELD
RE 9-7373-4

S C O S I
SPORTS CARS OF SPFLD., INC.
AUSTIN-HEALY . . SUNBEAM ALPINE . . HILLMAN . . MGA . . MORRIS
and NOW!! — Your Authorized Dealer For:
MERCEDES BENZ -- D.K.W.
SALES — SERVICE — PARTS
567 Main Street, corner Marble ST 8-0979

OUR ADVERTISERS

Below is a list of our advertisers for 1962. In your contacts please tell these people how much we appreciate their support.

Ascot Travel Service
Auto Centre
Blanc Pharmacy
Boyd, John B., Optician
Buckley's Pharmacy
Byron's Funeral Home, Inc.
Canton Restaurant, Inc.
Carroll Travel Bureau
Chester's Drug Store
Ciba Pharmaceutical Co.
Corliss Adjustment Bureau
Crotty Drug Store
Curran-Jones, Inc., Funeral Home
Dickinson-Streeter Co., Funeral Home
Flittner Drug Corp.
Foreign & Sport Car Brokers
Forest Park Ambulance Service
Fran's Restaurant
Global Travel Agency
Hafey Funeral Service
Hannigan-Fitzgerald Funeral Home, Inc.
Harris Pharmacy
Henderson Funeral Home
Jaycox Restaurant
Kane Pharmacy
King's Drug Store
Lederle Laboratories
Lessere-Wertheim Ins. Agency, Inc.
Lilly, Eli and Co.
Log Cabin Restaurant
Maitland Pharmacy
Maple Hill Nursing Home
Medical Credits Division, Credit Bureau, Inc.
Medical Management
Merit Pharmacal Co.
Merrell, William S. Co.
Murphy, P. E., Optician
Nagle Pharmacy
North End Pharmacy
North Side Pharmacy
O'Donnell, Edward F. Funeral Home, Inc.
Old Storrowton Tavern
Pergentene Pharmacal Co., Inc.
Pomeroy-Williams Co.
Professional Pharmacy
Ratell Funeral Home
Reid, A. R., Office Supplies
Riverdale Gardens Nursing Home
Ryan Drug Company
Safe Deposit Bank and Trust Co.
Sampson, T. P. Co., Funeral Home
Saratoga Drug Co.
Schering Corporation
Shaker Farms Country Club
Skinner, T. E. Associates
Smith Kline & French Laboratories
Sports Cars of Springfield, Inc.
Spring Street Drug, Inc.
Squibb, E. R. & Sons
St. Pierre, George and Son, Funeral Home
Student Prince Restaurant
Tazzini, George B., Funeral Home
Third National Bank of Hampden County
Third National Bank & Trust Company
Tober Foreign Motors, Inc.
Upjohn Company
U. S. Vitamin & Pharmaceutical Corp.
Valley Bank and Trust Co.
Valley Buick
Wallace Laboratories
Weidner Travel Bureau, Inc.
Willow Glen House, Restaurant
Yankee Pedlar Inn
W. F. Young, Inc.
White Street Pharmacy

Buckley's Pharmacy

JOHN A. BUCKLEY, B.S., Reg. Pharmacist

24 HOUR EMERGENCY PRESCRIPTION SERVICE

Prescriptions Delivered

2 NORTH MAIN STREET — EAST LONGMEADOW, MASS.

Call Anytime 525 - 3357

The opinions expressed in The Hippocrat do not necessarily represent the official viewpoint of the Hampden District Medical Society.

DOCTORS NEEDED

Sixteen Acres - - Wilbraham Area

ATTRACTIVE PROFESSIONAL OFFICES FOR RENT

New, modern offices with Air Conditioning, Heating and Lighting furnished, large parking area. Various size suites available at current office prices.

LOCATED IN THE CENTER
OF THE SIXTEEN ACRES SECTION OF SPRINGFIELD

This is an especially attractive area as two fine physicians are terminating their practices for exclusive Hospital Emergency Room Duty.

CONTACT MR. A. C. GOULET
HENRY M. CLARK CO., REALTORS
SPRINGFIELD, MASS.
REPUBLIC 7-0231

for Obesity - - TAD CAPS

Time Disintegration Capsules

JUST ONE CAPSULE, taken on arising: Provides appetite suppression, mood elevation and a metabolic boost . . . all day long.

IMMEDIATE RELEASE provides: Amphetamine Sulfate . . 5 mg., Thyroid . . 1 gr., Atropine Sulfate . . 1/360 gr., Aloin* . . 1/4 gr. *counteracts morning constipation.

INTERMEDIATE RELEASE provides: Amphetamine Sulfate . . 5 mg., Thyroid . . 1 gr., Atropine Sulfate . . 1/360 gr.

FINAL RELEASE provides: Amphetamine Sulfate . . 5 mg., Thyroid . . 1 gr., Phenobarbital* . . 1/4 gr. *relieves evening excitation.

Kare Pharmacal Co.
Hartford, Connecticut

FAMILY SECURITY

IS AN INDIVIDUAL RESPONSIBILITY

When the Third National's Trust Department assists you in planning your estate, you have taken a big step toward assuring the future security of your family. The Third offers complete trust services, including Living Trusts and Trusts under Wills as well as serving as executor, guardian, agent or custodian . . . depending on your requirements or desires. Now is the time to act! Our Trust Officers will be happy to answer your questions and cooperate with your attorney in setting up your own estate plan.

Third National Bank of Hampden County

Trust Department located at Main Office, 1391 Main Street, Springfield

MEMBER FEDERAL DEPOSIT INSURANCE CORPORATION

MEDICAL SERVICE DIVISION
OF
CORLISS ADJUSTMENT BUREAU, INC.

293 Bridge Street Springfield 3, Massachusetts

The only member of Medical Dental Hospital Bureaus of America, Inc. in Hampden County. Serving the "Business Side of Medicine" for nearly two decades. Our studied intent, in every contact with your delinquent patient, is to collect your money due while still retaining the patient's good will. A staff of twelve trained adjustors, specializing in the physician's collection problem, is at your service.

Mr. Corliss will consult with you at your convenience. Call Springfield RE 9-7346

Trusses — Surgical Belts — Colostomy Bags — Chairs and Hospital Beds

NORTH SIDE PHARMACY, INC.
TEMPLETON DRUG STORE, INC.

PRESCRIPTION SPECIALISTS

WESTFIELD, MASSACHUSETTS